AUSTRALIA

Communicable Diseases Intelligence

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Contents:

IMPORTED CHOLERA

El Tor cholera(serotype Ogawa) has been confirmed in a 63 year old man who returned to Australia on 29 June by air from Frankfurt, after travelling in America and Europe. On the return flight there had been brief stop-overs at the air terminals in Karachi and Kuala Lumpur. The patient was first seen and the diagnosis made at St Vincent's Hospital, Melbourne on 5 July. He was then transferred to Fairfield Hospital, Melbourne where he responded to treatment with intravenous fluid replacement and doxycycline. Salmonella (group E) was also isolated from his faeces, provisionally serotyped as S. senftenberg.

Tracing of other people on the same flight resulted in the testing of 66 individuals. All proved negative for V. cholerae, although a variety of salmonella serotypes were isolated from 13 of them; 5 S. mbandaka, 3 S. cerro, 1 S. ohio, 3 S. havana and 1 mixed culture of S. mbandaka and S. havana.

VIRUS REPORTING SCHEME - a total of 801 reports were submitted this period, although figures from one laboratory have not been received due to a delay in the mail. General patterns as indicated by the reports received include the continuation of the seasonal rise of respiratory syncytial virus (38 reports compared with 21, 17 and 7 of the previous three periods), and an increase in the number of reports of C. burneti (62 reports as opposed to 47, 37 and 7 reports for the previous three periods). Of the C. burneti isolations 36 were reported from Queensland, and one of the reports from South Australia described a 23 year old male with encephalitis. This is the first "Q" fever encephalitis this year, although five were reported to CDI in 1979.

Three arbovirus group B infections (all clinically dengue fever)were detected at Fairfield Hospital. The patients had recently returned from Bali, New Hebrides or Fiji. A dengue-like outbreak has been reported in Nauru, with 492 clinical cases (no deaths) up to 2 July. The fist nine cases were detected in May this year.

Less common isolates reported this period included the first 1980 notifications of echovirus type 1 and echovirus type 17 isolated from the faeces of a 2 year old male and 9 year old female respectively, in South Australia.

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UNUSUAL PENICILLINASE-PRODUCING N. GONORRHOEAE INFECTIONS

(Based on information contributed by M. Lindon, Venereal Diseases Unit, Royal Adelaide Hospital; Commonwealth Pathology Laboratory, Albury, and Woden Valley Hospital Laboratory.)

An outbreak of a penicillinase-producing strain of N. gonorrhoeae (PPNG) recently occurred in a group of young people in Adelaide. They were mostly unemployed and underprivileged, and tended to frequent certain discotheques and amusement arcades which are popular and cosmopolitan centres for assignations and easy "pick-ups".

Isolations were obtained from 14 individuals involved in the chain of infection. Twelve of these yielded PPNG, some with "non-producing" strains as well. The cultures from the other two individuals showed "non-producing" strains only; both the source of infection of one of these patients, and her post-infective contacts yielded PPNG strains. Despite vigorous contact tracing, no overseas source of infection could be demonstrated.

Patients generally showed temporary clinical improvement after initial treatment with penicillin, although symptoms had usually returned by the time that B-lactamase production was detected. All infections were ultimately treated successfully with single 2g injections of spectinomycin. This underlines the need for post-treatment cultures in all gonorrhoea cases, since temporary improvement may be misinterpreted as a cure both by doctor and patient.

Outbreaks of PPNG infection where an overseas source could not be established have also been reported in Salt Lake City, Utah[1]; Newark, New Jersey[1]; Shreveport, Louisiana[2]; Liverpool, England[3]; and possibly in Rotterdam, Holland[4].

Several of these outbreaks also occurred in underprivileged communities. Many met their several contacts at the one place. Most notably in the Rotterdam outbreak, the capability of the organism to produce pencillinase appeared to be unstable. On occasions, it was lost from the gonococci recovered from some of the patients, then reappeared either in the same patient or in later generations of contacts.

The original outbreaks of PPNG are thought to have occurred as two almost simultaneous but independent genetic events in West Africa and South East Asia. The two strains differ in their growth requirements, the molecular sizes of their R-factor penicillinase plasmid, and the presence of an additional plasmid with sex factor activity in Far Eastern isolates which is absent in the West African PPNG strains. The penicillinase information is often rapidly lost from the R-factor when PPNG are subcultured on media free of penicillin. This loss may also occur in nature unless the host is taking penicillin orally for prophylaxis. It has also been observed that penicillinase positive and negative colonies may co-exist at the same site of infection in over 40% of patients infected with PPNG, so either strain or both could be transferred to a contact.[1]

The penicillinase plasmid also has a DNA structure similar to that of the

penicillinase plasmid of enterobacteriaceae and ampicillin resistant Haemophilus influenzae.[5] Consequently, it is possible that these bacteria are transmitting the penicillinase plasmids to N. gonorrhoeae in nature. It is also possible that spontaneous local generation of the β-lactamase activity may occur elsewhere, and this may have been witnessed in South Australia and some of the other outbreaks mentioned above.

An example of the loss of plasmid on subculture is thought to have occurred in Australia recently. In February this year the Commonwealth Pathology Laboratory in Albury isolated a β-lactamase producing strain from a male recently returned from Thailand. The organism was sub-cultured onto a chocolate agar slope and sent to Woden Valley Hospital, Canberra, for confirmation of β-lactamase production. On testing there, it was found to be β-lactamase negative, and sensitive to 0.8 µgm/ml of penicillin. These varying characteristics of the organism illustrate the difficulties involved in both the evaluation of the prevalence of infection and of management. Effective control is thus entirely dependent on the most vigorous efforts in contact tracing accompanied by conscientious treatment and follow-up of all cases.

References

1. Sexually Transmitted Diseases (J. Am.Vener. Dis. Assoc.) (1979) 6 No.2 (Supplement): 152
2. MMWR (1980) 29 21:241
3. Br. J. Vener. Dis. (1978) 54:28
4. Br. J. Vener. Dis. (1977) 53:98
5. Antimicrob. Agents Chemother. (1977) 11:528

CORRIGENDUM - CDI 80/13

Page 2 - Table "Reports of PPNG Cases by Probable Source of Infection - Australia 1980 - Jan-June."

Several new isolations of PPNG have been reported for the month of June, including three males from South Australia whose source of infection was local, through homosexual activity. To incorporate these and some errors which have come to notice, the table will be reproduced when all reports for June have been received.

YERSINIA ENTEROCOLITICA FROM BLOOD CULTURES

(Contributed by V. Travis, Pathology Laboratory, Dandenong and District Hospital, Victoria.)

Between September 1976 and January 1979, Y. enterocolitica was isolated from blood cultures from 11 patients. The organisms grew easily in tryptone soya broth or on thioglycolate, sometimes both. Serotyping was undertaken by Professor S. Winblad in Sweden who confirmed that all were O serotypes 9B, 15C or a mixture of both. Brief details of the cases are as follows:-

1. A housewife aged 45 years, with chest, arm and neck pains and a

history of mitral/aortic valve replacement in 1976; diagnosed as a possible late post-pericardiotomy syndrome.

2. A male 'motor industry upholsterer' aged 57 years, with an influenza-like illness, bronchitis, and pyrexia of two weeks duration.

3. An insurance salesman aged 56 years, with myocardial infarction. He received ampicillin therapy prior to the organism being detected.

4. A 41 year old housewife who had suffered a cerebrovascular accident resulting in right-sided weakness and dysarthria. She had a history of an aortic valve replacement.

5. Schoolgirl, 14 years old,with gallstones and a history of jaundice; diagnosed as cholecystitis with hepatic abscess. She received gentamicin and ampicillin therapy.

6. A waitress, aged 33 years, with fever, headache, abdominal tenderness, and a history of aortic/mitral valve replacement. She was later found to have Candida tropicalis endocarditis both by blood culture and at operation.

7. Male, 10 years, with an acute bronchitis and an atrial septal defect.

8. Company Secretary, aged 44 years, with sore throat and lymphadenopathy. In spite of the positive culture he was finally diagnosed as "infectious mononucleosis".

9. A storeman/driver aged 66 years, with post-operative illness following operation for bowel obstruction. He had a history of total cystectomy for carcinoma of the bladder, and chronic obstructive airway disease. The positive culture was obtained between two courses of ampicillin. The patient died.

10. An 11 year old schoolboy with lower back pain following a fall; suspected possible osteomyelitis.

11. Female, 17 years, with vomiting, depression and abdominal pain following paracetamol overdose. The blood sample had been taken on admission.

Editorial Comment (based on WER (1980) 55:137)

Human infection due to Y. enterocolitica, a gram-negative coccobacillus, is usually confined to the O serotypes, and presents as gastroenteritis, mesenteric lymphadenitis, terminal ileitis and septicaemia, often with visceral abscesses. Up to 1-3% of acute enteritis infections in Europe and Canada are attributed to Y. enterocolitica. No large studies have been made in the developing countries. Outbreaks of enteric infection have occurred both within family units and in hospitals. In these circumstances transmission is thought to be by person-to-person spread. One outbreak in the USA was traced to contaminated chocolate milk. The serotypes exhibit

some geographical distribution, with the 03 serotype prevalent in Europe, and the 08 serotype in Canada and USA. In Europe, Y. enterocolitica is predominantly a winter infection. In children, the enteritis is acute but non-complicated and the incidence decreases with age. In adults, infection can be complicated by erythema nodosum and reactive arthritis, probably through a secondary immune response.

Some "environmental" strains are regarded more as "opportunist pathogens" and produce more atypical infections(1). Studies in Belgium and Denmark have shown that 3-5% of pigs are intestinal carriers of serotype 03. Throat and tongue cultures have been positive in up to 53% of these animals. Cats and dogs are often infected, and cases of simultaneous infection of children, cats and dogs in the same household have been reported. However, whether they can transmit the disease to man is still not clear.

With reference to the patients reported from Dandenong, it is of interest to note that following the closure of the Dandenong bacon factory at approximately the same time as the last reported positive culture was obtained, no further cases have been detected by the laboratory there.

They are also of interest in that although the isolations were obtained from blood cultures of patients with a variety of conditions, several normally associated with Y. enterocolitica septicaemia, five of them had pathological conditions of the heart.

Reference

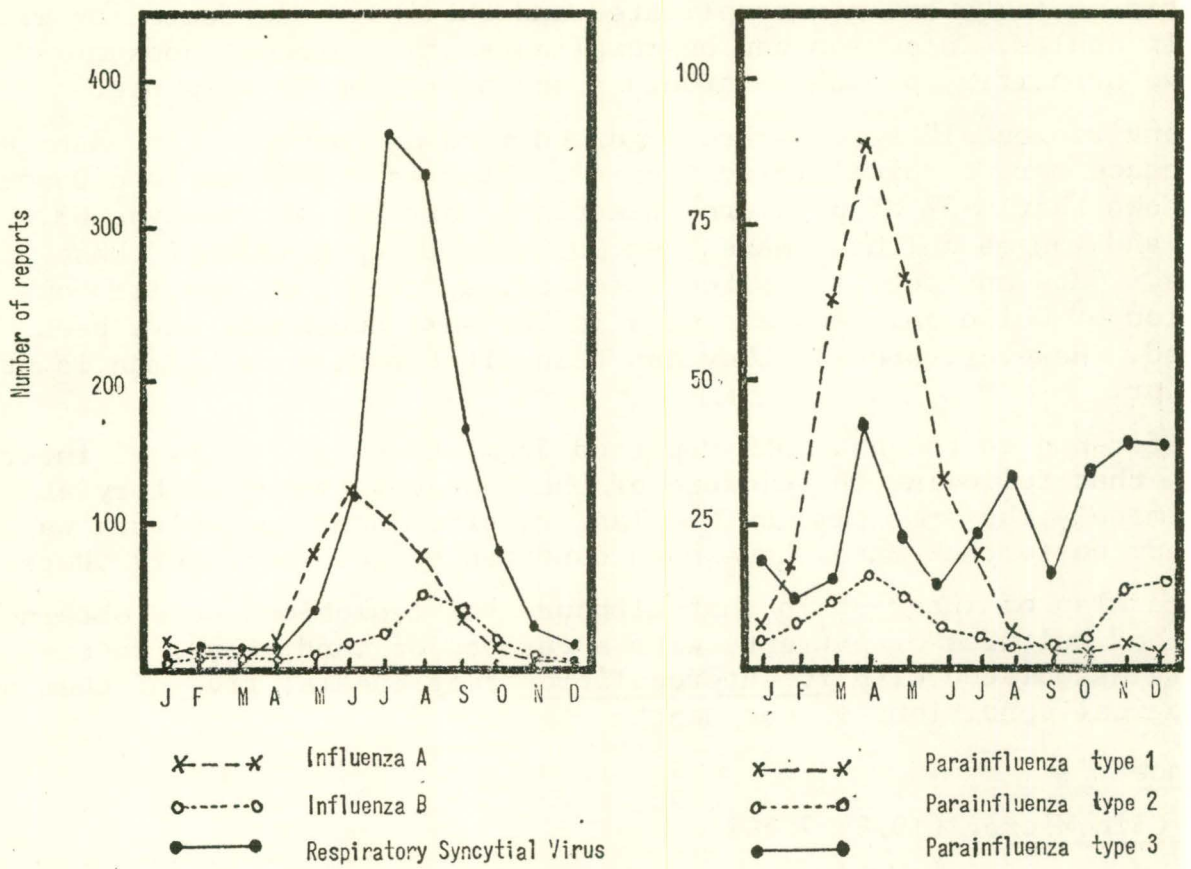
1. J. Clin.Micro. (1978) 7:562

LABORATORY EVIDENCE FOR RESPIRATORY VIRUS INFECTIONS IN AUSTRALIA, 1979

During 1979, 5065 reports of viruses (including M. pneumoniae) that predominantly infect the respiratory system were received by the CDI. This figure represented 27.4% of the total reports. The group comprised adenoviruses (24%), respiratory syncytial virus (24%), M. pneumoniae (20%), influenza A virus (9%), rhinoviruses (6%), parainfluenza virus, types 1 and 3 (6% each), influenza B virus (3%) and parainfluenza virus type 2 (2%). The figures overleaf illustrate the seasonal variation for six of these viruses. Note should be taken of the difference in the ordinate scale between the two figures.

Certain variables must be considered in the examination of the graphs. The number of reports for each virus differed considerably; the reporting for respiratory syncytial virus peaked at 367 isolations for one month, whereas the highest monthly report for parainfluenza virus, type 2, was only 16. In addition, the figures depict the seasonal variation for the whole of Australia. This parameter is reflected in the broad peak for influenza A virus. If the data is broken down into the nine individual contributing laboratories, the maximum incidences for influenza A virus differ by up to 3 months. A second laboratory variable is illustrated by influenza B virus, where 69% of all reported cases were from Western Australia.

Monthly Reported Isolation of Six Respiratory Viruses, 1979



Nevertheless, when the virus isolations are considered for Australia as a whole, several of the viruses had different seasonal peaks. The frequency of reports for the three types of parainfluenza virus peaked during the month of April. This was followed by influenza A virus in June, respiratory syncytial virus in July, and influenza B virus in August. The reports are not shown for the rhinoviruses which showed only a small increase over the whole of the winter period (March to August), the adenoviruses which gave random fluctuations, and M. pneumoniae which showed an overall decrease during 1979 from a peak in November 1978. This decrease has continued throughout the first 6 months of 1980.

The relevance of this differing seasonal variation is unknown. When compared with the previous year, the peaks for respiratory syncytial virus and influenza B virus were during the same months, July and August respectively. Parainfluenza virus type 2 peaked almost at the same time - April in 1979 and March-April in 1978. However, differences were observed with parainfluenza virus type 3 which showed two peaks, one in April (as in 1979) and the other in October; and parainfluenza virus type 1 which showed no seasonal rise. Influenza A virus peaked in October 1978 and in June 1979, however numerous factors can influenze influenza A virus activity in any community.

AUSTRALIA - COMMUNICABLE DISEASES INTELLIGENCE

REPORTING PERIOD - 26-6-80 . 9-7-80 BULLETIN NUMBER . 80/14

VIRAL IDENTIFICATIONS FROM CONTRIBUTING LABORATORIES

VIRUS OR VIRAL ANTIGEN	ICPMR (NSW)/ WVH (ACT)	RAHC (NSW)	PHH/ PCW (NSW)	FAIR-FIELD (VIC)	RCH (VIC)	IMVS (SA)	STATE LAB (QLD)	STATE LAB (WA)	T
0100 ADENOVIRUS NOT TYPED	11		10	1			3		25
0101 ADENOVIRUS TYPE 1			1			6			7
0102 ADENOVIRUS TYPE 2	1		1	1		4		1	8
0103 ADENOVIRUS TYPE 3			1			1			2
0104 ADENOVIRUS TYPE 4						1			1
0105 ADENOVIRUS TYPE 5						2			2
0107 ADENOVIRUS TYPE 7				1		1		2	4
0119 ADENOVIRUS TYPE 19	4		1					3	8
0199 ADENOVIRUS TYPING PENDING			1			2			3
0201 INFLUENZA A VIRUS	4		1				1	1	7
0203 INFLUENZA B VIRUS	1					1	3	1	6
0301 PARAINFLUENZA VIRUS TYPE 1						1		1	2
0302 PARAINFLUENZA VIRUS TYPE 2		3		3			2	6	14
0303 PARAINFLUENZA VIRUS TYPE 3	1					7	1	1	10
0399 PARAINFLUENZA VIRUS TYPING PENDING						2		1	3
0400 RESPIRATORY SYNCYTIAL VIRUS (RS)	11	18				4	3	2	38
0500 RHINOVIRUS (ALL TYPES)	2	1		7		3	7		20
0600 MYCOPLASMA PNEUMONIAE	4	1		1			4	1	11
0700 ORNITHOSIS-PSITTACOSIS	3		2	2		4		2	13
0809 COXSACKIEVIRUS A9				1					1
0902 COXSACKIEVIRUS B2								1	1
0903 COXSACKIEVIRUS B3	1	1							2
0904 COXSACKIEVIRUS B4						3			3
1001 ECHOVIRUS TYPE 1						1			1
1007 ECHOVIRUS TYPE 7								1	1
1009 ECHOVIRUS TYPE 9						1			1
1017 ECHOVIRUS TYPE 17						1			1
1022 ECHOVIRUS TYPE 22			2						2
1025 ECHOVIRUS TYPE 25		1				2			3
1030 ECHOVIRUS TYPE 30				3					3
1099 ECHOVIRUS TYPING PENDING			10				1		11
1101 POLIOVIRUS TYPE 1						1	1	1	3

AUSTRALIA - COMMUNICABLE DISEASES INTELLIGENCE 2

REPORTING PERIOD - 26-6-80 .9-7-80 BULLETIN NUMBER .80/14

VIRAL IDENTIFICATIONS FROM CONTRIBUTING LABORATORIES-CONTINUED

VIRUS OR VIRAL ANTIGEN	ICPMR (NSW)/ WVH (ACT)	RAHC (NSW)	PHH/ PCW (NSW)	FAIR-FIELD (VIC)	RCH (VIC)	IMVS (SA)	STATE LAB (QLD)	STATE LAB (WA)	T
1102 POLIOVIRUS TYPE 2	1	1				2	1		5
1103 POLIOVIRUS TYPE 3				1					1
1104 POLIOVIRUS-VACCINAL STRAIN	1		4			1			6
1200 MUMPS VIRUS	1	1	1					1	4
1300 HERPES VIRUS GROUP-NOT TYPED	12		2	3		1	25	30	73
1301 HERPES SIMPLEX VIRUS-NOT TYPED	1						3		4
1302 EPSTEIN-BARR VIRUS (EB VIRUS)				3					3
1303 VARICELLA-ZOSTER VIRUS	2		2			1	1		6
1306 HERPES SIMPLEX TYPE 1	7			13		6			26
1307 HERPES SIMPLEX TYPE 2	41			19		18			78
1399 HERPES VIRUS TYPING PENDING			6			4		1	11
1401 COXIELLA BURNETI	12			9		5	36		62
1502 PICORNA VIRUS-NOT TYPED								1	1
1521 MEASLES VIRUS				1		1	4		6
1522 RUBELLA VIRUS	2		1			1			4
1530 HEPATITIS A VIRUS						10		22	32
1531 HEPATITIS B VIRUS	1			21		22		7	51
1532 HEPATITIS B ANTIGEN	10		13				7		30
1535 HEPATITIS A ANTIBODY	5								5
1541 CHLAMYDIA A - TRIC TYPE	15		4					29	48
1556 CMV - CYTOMEGALOVIRUS	8		3	9		3	2	3	28
1562 REOVIRUS (ALL TYPES)						1			1
1564 ROTAVIRUS	19		4	16		21			60
1599 ENTEROVIRUS TYPING PENDING						2			2
ROSS RIVER VIRUS				1			24		25
SMALL VIRUS (LIKE) PARTICLE	3			2		4			9
ARBO. GROUP B.				3					3
TOTAL	184	27	70	121		151	129	119	801

AUSTRALIA - COMMUNICABLE DISEASES INTELLIGENCE 3

PERIOD : 26/6/80 to 9/7/80 .... 80/14

Viral Identifications by Clinical Information Table 1.
Code 00,99 -No ill or data; 01,02,11,12 -Respiratory; 03 -Encephalitis; 03 -Meningitis; 04 -Paralysis; 05,13 -CNS other unspec.; 07,49 -GI; 17,47 -Hepatic; 19 -CVS; 89 -Urinary; 06 -Skin/mucous.-CONTINUED

VIRUS OR VIRAL ANTIGEN	No-ill or data	Respiratory	Encephalitis	Meningitis	Paralysis	CNS other unspec	GI	Hepatic	CVS	Urinary	Skin/mucs memb
0100 ADENOVIRUS NOT TYPED.....	2	7					8		1		
0101 ADENOVIRUS TYPE 1.....		1					6				
0102 ADENOVIRUS TYPE 2.....	1	1					6				
0103 ADENOVIRUS TYPE 3.....		1						1			
0104 ADENOVIRUS TYPE 4.....		1									
0105 ADENOVIRUS TYPE 5.....							2				
0107 ADENOVIRUS TYPE 7.....	1	2									1
0119 ADENOVIRUS TYPE 19.....	1										
0201 INFLUENZA A VIRUS.....	2	4									
0203 INFLUENZA B VIRUS.....	1	4									
0301 PARAINFLUENZA VIRUS TYPE 1....		2									
0302 PARAINFLUENZA VIRUS TYPE 2....	1	12		1							1
0303 PARAINFLUENZA VIRUS TYPE 3....		10									
0400 RESPIRATORY SYNCYTIAL VIRUS (RS).....		37									
0500 RHINOVIRUS (ALL TYPES).....		21		1							
0600 MYCOPLASMA PNEUMONIAE.....		11									1
0700 ORNITHOSIS-PSITTACOSIS.....	1	10									
0809 COXSACKIEVIRUS A9.....				1							
0902 COXSACKIEVIRUS B2.....		1									
0903 COXSACKIEVIRUS B3.....		1									
0904 COXSACKIEVIRUS B4.....		1									
1001 ECHOVIRUS TYPE 1.....							1				
1009 ECHOVIRUS TYPE 9.....							1				
1017 ECHOVIRUS TYPE 17.....							1				
1022 ECHOVIRUS TYPE 22.....							2				
1025 ECHOVIRUS TYPE 25.....							1	1			
1030 ECHOVIRUS TYPE 30.....		1		2							

AUSTRALIA - COMMUNICABLE DISEASES INTELLIGENCE 4

PERIOD : 24/6/80 to 9/7/80 .... 80/14
Viral Identifications by Clinical Information Table 1.
Code 00,99 -No ill or data; 01,02,11,12 -Respiratory; E3 -Enceph-alitis; M3 -Meningitis; 04 -Paralysis; 05,13 -CNS other unspec.; 07,49 -GI; 17,47 -Hepatic; 19 -CVS; 89 -Urinary; 06 -Skin/mucous.

VIRUS OR VIRAL ANTIGEN	No-ill or data	Respir atory	Enceph alitis	Mening -itis	Para- lysis	CNS other unspec	GI	Hepa -tic	CVS	Urin -ary	Skin/ mucs memb
1101 POLIOVIRUS TYPE 1.....							1				
1102 POLIOVIRUS TYPE 2.....	1	1							1		
1103 POLIOVIRUS TYPE 3.....							1				
1104 POLIOVIRUS-VACCINAL STRAIN....							5		1		
1200 MUMPS VIRUS.....	1		1			1					
1300 HERPES VIRUS GROUP-NOT TYPED..	16	2									32
1301 HERPES SIMPLEX VIRUS-NOT TYPED		1									1
1303 VARICELLA-ZOSTER VIRUS.....	1	1		1							4
1306 HERPES SIMPLEX TYPE 1.....		3									17
1307 HERPES SIMPLEX TYPE 2.....											1
1401 COXIELLA BURNETI.....	9		1								
1502 PICORNA VIRUS-NOT TYPED.....							1				
1521 MEASLES VIRUS.....		1	2								4
1522 RUBELLA VIRUS.....											3
1530 HEPATITIS A VIRUS.....	4							28			
1531 HEPATITIS B VIRUS.....	27							23			
1532 HEPATITIS B ANTIGEN.....	3							27			
1535 HEPATITIS A ANTIBODY.....								5			
1541 CHLAMYDIA A - TRIC TYPE.....	28										
1556 CMV - CYTOMEGALOVIRUS.....	9	3						1		6	
1562 REOVIRUS (ALL TYPES).....							1				
1564 ROTAVIRUS.....							60				
ROSS RIVER VIRUS	3										4
SMALL VIRUS (LIKE) PARTICLE							9				
TOTAL.....	112	140	4	6		1	106	86	3	6	69

AUSTRALIA - COMMUNICABLE DISEASES INTELLIGENCE

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PERIOD : 26/6/80 to 9/7/80 ... 80/14
Viral Identifications by Clinical Information Table 2.
Code 10 -Eye; 59 -Genital; 39 -Endo/sal gland;
38 -RES; 29 -Muscle/joint; 69 -Congenital; P8 -PUO;
G8 -Fever/malaise; 09 -Other; A1 -SIDS ...

VIRUS OR VIRAL ANTIGEN	Eye	Genital	Endo/sal gland	RES	Muscle/joint	Congenital	PUO	Fever/malaise	Other	SIDS
0100 ADENOVIRUS NOT TYPED.....	1		1		1		1	3	1	
0107 ADENOVIRUS TYPE 7.....	1									
0119 ADENOVIRUS TYPE 19.....	7									
0201 INFLUENZA A VIRUS.....							1			
0203 INFLUENZA B VIRUS.....			1					1		
0302 PARAINFLUENZA VIRUS TYPE 2....								1		
0400 RESPIRATORY SYNCYTIAL VIRUS (RS).....							2			
0500 RHINOVIRUS (ALL TYPES).....							2			
0700 ORNITHOSIS-PSITTACOSIS.....					2			1		
0902 COXSACKIEVIRUS B2.....					1					
0903 COXSACKIEVIRUS B3.....										1
0904 COXSACKIEVIRUS B4.....								1	1	
1007 ECHOVIRUS TYPE 7.....						1				
1025 ECHOVIRUS TYPE 25.....										1
1101 POLIOVIRUS TYPE 1.....								1		1
1102 POLIOVIRUS TYPE 2.....										2
1200 MUMPS VIRUS.....			1					1		
1300 HERPES VIRUS GROUP-NOT TYPED..		19	1				1		1	1
1301 HERPES SIMPLEX VIRUS-NOT TYPED		3								
1302 EPSTEIN-BARR VIRUS (EB VIRUS).			3		1					
1306 HERPES SIMPLEX TYPE 1.....	1	4	2					1		
1307 HERPES SIMPLEX TYPE 2.....		77								
1401 COXIELLA BURNETI.....			1		2		6	44	1	
1521 MEASLES VIRUS.....					1					
1522 RUBELLA VIRUS.....									1	
1531 HEPATITIS B VIRUS.....									1	
1541 CHLAMYDIA A - TRIC TYPE.....	3	17								
1556 CMV - CYTOMEGALOVIRUS.....		1				1	5	1	3	
ROSS RIVER VIRUS					21			1		
ARBU. GROUP B.								3		
TOTAL.....	13	121	10		29	2	18	59	9	6

NOTIFIABLE DISEASES REPORTED IN AUSTRALIA

5th and 6th.... 4 Weekly Period for...1980.

19.4.80 to 13.6.80 inclusive

Bulletin ..80/14

Disease	N.S.W.	VIC	QLD	S.A.	W.A.	TAS.	N.T.	A.C.T.	Total	CUMULATIVE TOTAL TO DATE FOR YEAR
Amoebiasis			9	1	1	1		1	13	27
Ankylostomiasis			9						9	88
Anthrax									—	1
Arbovirus infection			5						5	19
Brucellosis	3		2	2					7	33
Campylobacter infections				55					55	142
Chancroid			8						8	17
Cholera									—	2
Congenital rubella syndrome									—	—
Diphtheria									—	1 CARRIER
Donovanosis			7				3		10	30
Giardiasis				134					134	211
Genital herpes				61					61	152
Gonococcal ophthalmia neonatorum									—	—
Gonorrhoea	389	453	317	118	177	31	145	16	1646	5147
Hepatitis A (infectious)	89	43	17	6	14	5	14	4	192	588
Hepatitis B (serum)	50	27	11	52	3	2	2	1	148	394
Hepatitis - unspecified				3	21				24	79
Hydatid disease		1	1			1		1	4	14
Lassa Fever									—	—
Legionnaires disease									—	—
Leprosy		1					1		2	* 13
Leptospirosis		1	5	3					9	24
Lymphogranuloma venereum									—	1
Malaria	18	24	34	9	12	1		2	100	*285
Marburg Disease									—	—
Meningococcal infections		1	7						8	40
Non-specific urethritis				213					213	576
Ornithosis				3				1	4	9
Pertussis (whooping cough)		11		16					27	46
Plague									—	—
Poliomyelitis									—	—
Q. fever	8	1	101	19					129	269
Rabies									—	—

DISEASE	N.S.W.	VIC	QLD	S.A.	W.A.	TAS.	N.T.	A.C.T.	Total	CUMULATIVE TOTAL TO DATE FOR YEAR
Salmonella infections		64	32	88	31	2	35	3	255	1305
Shigella infections		7	25	7	28		38	4	109	283
Smallpox									—	—
Syphilis	33	16	93	68	32		70		312	1165
Tetanus			1						1	1
Trachoma									—	—
Tuberculosis (all forms)	77	77	36	23	24	7	3	7	254	760
Typhoid fever		3			2				5	8 + 1 CARRIER
Typhus (all forms)									—	—
Vibrio parahaemolyticus infections									—	—
Yellow Fever									—	—
Yersinia enterocolitica infections									—	—

(Note: Data collected under the Notifiable Diseases Returns may bear little or no correlation to that collected under the CDI laboratory scheme. Whilst the latter is a sampling program, the Notifiable Diseases data is dependent upon voluntary reporting by medical practitioners etc.)

* **Corrections made to the Cumulative Total since last report.**

Leprosy - + 1 case for Vic.

Malaria - + 3 cases for N.T.

AUSTRALI[illegible]- COMMUNICABLE DISEASES INTEL[illegible]GENCE

REPORTING PERIOD -26/6/80 - 9/7/80 BULLETIN NUMBER 80.14

VIRAL IDENTIFICATIONS FROM CONTRIBUTING LABORATORIES

VIRUS OR VIRAL ANTIGEN	ICPMR (NSW)/ WVH (ACT)	RAHC (NSW)	PHH/ POW (NSW)	FAIR-FIELD (VIC)	RCH (VIC)	IMVS (SA)	STATE LAB (QLD)	STATE LAB (WA)	Total
0100 ADENOVIRUS NOT TYPED	11		10	1	3		3		28
0101 ADENOVIRUS TYPE 1			1			6			7
0102 ADENOVIRUS TYPE 2	1		1	1	2	4		1	10
0103 ADENOVIRUS TYPE 3			1			1			2
0104 ADENOVIRUS TYPE 4						1			1
0105 ADENOVIRUS TYPE 5						2			2
0107 ADENOVIRUS TYPE 7				1	2	1		2	6
0119 ADENOVIRUS TYPE 19	4		1					3	8
0199 ADENOVIRUS TYPING PENDING			1		6	2			9
0201 INFLUENZA A VIRUS	4		1		1		1	1	8
0203 INFLUENZA B VIRUS	1					1	3	1	6
0301 PARAINFLUENZA VIRUS TYPE 1						1		1	2
0302 PARAINFLUENZA VIRUS TYPE 2		3		3	6		2	6	20
0303 PARAINFLUENZA VIRUS TYPE 3	1				10	7	1	1	20
0399 PARAINFLUENZA VIRUS TYPING PENDING						2		1	3
0400 RESPIRATORY SYNCYTIAL VIRUS (RS)	11	18			36	4	3	2	74
0500 RHINOVIRUS (ALL TYPES)	2	1		7	9	3	7		29
0600 MYCOPLASMA PNEUMONIAE	4	1		1			4	1	11
0700 ORNITHOSIS-PSITTACOSIS	3		2	2		4		2	13
0809 COXSACKIEVIRUS A9				1	2				3
0902 COXSACKIEVIRUS B2					2			1	3
0903 COXSACKIEVIRUS B3	1	1							2
0904 COXSACKIEVIRUS B4						3			3
1001 ECHOVIRUS TYPE 1						1			1
1007 ECHOVIRUS TYPE 7								1	1
1009 ECHOVIRUS TYPE 9						1			1
1017 ECHOVIRUS TYPE 17						1			1
1022 ECHOVIRUS TYPE 22			2						2
1025 ECHOVIRUS TYPE 25		1				2			3
1030 ECHOVIRUS TYPE 30				3					3
1099 ECHOVIRUS TYPING PENDING			10				1		11
1101 POLIOVIRUS TYPE 1						1	1	1	3

AUSTRALIA - COMMUNICABLE DISEASES INTELLIGENCE

REPORTING PERIOD - 26/6/80 - 9/7/80. BULLETIN NUMBER - 80/14

VIRAL IDENTIFICATIONS FROM CONTRIBUTING LABORATORIES-CONTINUED

VIRUS OR VIRAL ANTIGEN	ICPMR (NSW) / WVH (ACT)	RAHC (NSW)	PHH/ POW (NSW)	FAIR-FIELD (VIC)	RCH (VIC)	IMVS (SA)	STATE LAB (QLD)	STATE LAB (WA)	Total
1102 POLIOVIRUS TYPE 2	1	1				2	1		5
1103 POLIOVIRUS TYPE 3				1					1
1104 POLIOVIRUS-VACCINAL STRAIN	1		4		3	1			9
1200 MUMPS VIRUS	1	1	1					1	4
1300 HERPES VIRUS GROUP-NOT TYPED	12		2	3	1	1	25	30	74
1302 EPSTEIN-BARR VIRUS (EB VIRUS)				3					3
1303 VARICELLA-ZOSTER VIRUS	2		2			1	1		6
1306 HERPES SIMPLEX TYPE 1	7			13		6			26
1307 HERPES SIMPLEX TYPE 2	41			19		18			78
1399 HERPES VIRUS TYPING PENDING			6		1	4		1	12
1401 COXIELLA BURNETI	12			9		5	36		62
1502 PICORNA VIRUS-NOT TYPED								1	1
1521 MEASLES VIRUS				1		1	4		6
1522 RUBELLA VIRUS	2		1			1			4
1530 HEPATITIS A VIRUS						10		22	32
1531 HEPATITIS B VIRUS	1			21		22		7	51
1532 HEPATITIS B ANTIGEN	10		13				7		30
1535 HEPATITIS A ANTIBODY	5								5
1541 CHLAMYDIA A - TRIC TYPE	15		4					29	48
1556 CMV - CYTOMEGALOVIRUS	8		3	9	5	3	2	3	33
1562 REOVIRUS (ALL TYPES)						1			1
1564 ROTAVIRUS	19		4	16	4	21			64
1599 ENTEROVIRUS TYPING PENDING					13	2			15
ROSS RIVER VIRUS				1			24		25
SMALL VIRUS (LIKE) PARTICLE	3			2	1	4			10
ARBO. GROUP B.				3					3
Total	183	27	70	121	107	151	126	119	904

AUSTRALIA - COMMUNICABLE DISEASES INTELLIGENCE

PERIOD : 26/6/80 to 9/7/80 .... BULLETIN No. 80/14

Viral Identifications by Clinical Information Table 1.

Code 00,99 -No ill or data; 01,02,11,12 -Respiratory; E3 -Encephalitis; M3 -Meningitis; 04 -Paralysis; 05,13 -CNS other unspec.; 07,49 -GI; 17,47 -Hepatic; 19 -CVS; 89 -Urinary; 06 -Skin/mucous.

VIRUS OR VIRAL ANTIGEN	No-ill or data	Respiratory	Encephalitis	Meningitis	Paralysis	CNS other unspec	GI	Hepatic	CVS	Urinary	Skin/mucs memb
0100 ADENOVIRUS NOT TYPED.....	2	8					9		1		
0101 ADENOVIRUS TYPE 1.....		1					6				
0102 ADENOVIRUS TYPE 2.....	1	1					7				
0103 ADENOVIRUS TYPE 3.....		1						1			
0104 ADENOVIRUS TYPE 4.....		1									
0105 ADENOVIRUS TYPE 5.....							2				
0107 ADENOVIRUS TYPE 7.....	1	2					2				1
0119 ADENOVIRUS TYPE 19.....	1										
0201 INFLUENZA A VIRUS.....	2	5									
0203 INFLUENZA B VIRUS.....	1	4									
0301 PARAINFLUENZA VIRUS TYPE 1....		2									
0302 PARAINFLUENZA VIRUS TYPE 2....	1	18		1							1
0303 PARAINFLUENZA VIRUS TYPE 3....		20									1
0400 RESPIRATORY SYNCYTIAL VIRUS (RS).....		73									
0500 RHINOVIRUS (ALL TYPES).....		28		1		1	1				
0600 MYCOPLASMA PNEUMONIAE.....		11									1
0700 ORNITHOSIS-PSITTACOSIS.....	1	10									
0809 COXSACKIEVIRUS A9.....				2							
0902 COXSACKIEVIRUS B2.....		1		1							1
0903 COXSACKIEVIRUS B3.....		1									
0904 COXSACKIEVIRUS B4.....		1									
1001 ECHOVIRUS TYPE 1.....							1				
1009 ECHOVIRUS TYPE 9.....							1				
1017 ECHOVIRUS TYPE 17.....							1				
1022 ECHOVIRUS TYPE 22.....							2				
1025 ECHOVIRUS TYPE 25.....							1	1			
1030 ECHOVIRUS TYPE 30.....		1		2							

See footnotes at end of table.

AUSTRALIA - COMMUNICABLE DISEASES INTELLIGENCE

PERIOD : 26/6/80 to 9/7/80 .... 80/14
Viral Identifications by Clinical Information Table 1.
Code 00,99 -No ill or data; 01,02,11,12 -Respiratory; E3 -Enceph-
alitis; M3 -Meningitis; 04 -Paralysis; 05,13 -CNS other unspec.;
07,49 -GI; 17,47 -Hepatic; 19 -CVS; 89 -Urinary; 06 -Skin/mucous.-CONTINUED

VIRUS OR VIRAL ANTIGEN	No-ill or data	Respir atory	Enceph alitis	Mening -itis	Para- lysis	CNS other unspec	GI	Hepa -tic	CVS	Urin -ary	Skin/ mucs membs
1101 POLIOVIRUS TYPE 1.....							1				
1102 POLIOVIRUS TYPE 2.....	1	1							1		
1103 POLIOVIRUS TYPE 3.....							1				
1104 POLIOVIRUS-VACCINAL STRAIN....		2					6		1		
1200 MUMPS VIRUS.....	1		1			1					
1300 HERPES VIRUS GROUP-NOT TYPED..	16	2									33
1303 VARICELLA-ZOSTER VIRUS.....	1	1		1							4
1306 HERPES SIMPLEX TYPE 1.....		3									17
1307 HERPES SIMPLEX TYPE 2.....											1
1401 COXIELLA BURNETI.....	9		1								
1502 PICORNA VIRUS-NOT TYPED.....							1				
1521 MEASLES VIRUS.....		1	2								4
1522 RUBELLA VIRUS.....											3
1530 HEPATITIS A VIRUS.....	4							28			
1531 HEPATITIS B VIRUS.....	27							23			
1532 HEPATITIS B ANTIGEN.....	3							27			
1535 HEPATITIS A ANTIBODY.....								5			
1541 CHLAMYDIA A - TRIC TYPE.....	28										
1556 CMV - CYTOMEGALOVIRUS.....	10	4				1		1		6	
1562 REOVIRUS (ALL TYPES).....							1				
1564 ROTAVIRUS.....	3						61				
ROSS RIVER VIRUS	3										4
SMALL VIRUS (LIKE) PARTICLE	1						9				
Total.....	117	203	4	8		3	113	86	3	6	71

AUSTRALIA - COMMUNICABLE DISEASES INTELLIGENCE

PERIOD : 26/6/80 to 9/7/80 ... 80/14
Viral Identifications by Clinical Information Table 2.
Code 10 -Eye; 59 -Genital; 39 -Endo/sal gland;
38 -RES; 29 -Muscle/joint; 69 -Congenital; P8 -PUO;
G8 -Fever/malaise; 09 -Other; A1 -SIDS ...

VIRUS OR VIRAL ANTIGEN	Eye	Genital	Endo/sal gland	RES	Muscle/joint	Congenital	PUO	Fever/malaise	Other	SIDS
0100 ADENOVIRUS NOT TYPED.....	1		1		1		1	3	1	
0102 ADENOVIRUS TYPE 2.....							1			
0107 ADENOVIRUS TYPE 7.....	1									
0119 ADENOVIRUS TYPE 19.....	7									
0201 INFLUENZA A VIRUS.....							2			
0203 INFLUENZA B VIRUS.....			1					1		
0302 PARAINFLUENZA VIRUS TYPE 2....								1		
0303 PARAINFLUENZA VIRUS TYPE 3....								1		
0400 RESPIRATORY SYNCYTIAL VIRUS (RS).....							2	1		
0500 RHINOVIRUS (ALL TYPES).....							2			1
0700 ORNITHOSIS-PSITTACOSIS.....					2			1		
0809 COXSACKIEVIRUS A9.....									1	
0902 COXSACKIEVIRUS B2.....					1		1			
0903 COXSACKIEVIRUS B3.....										1
0904 COXSACKIEVIRUS B4.....								1	1	
1007 ECHOVIRUS TYPE 7.....						1				
1025 ECHOVIRUS TYPE 25.....										1
1101 POLIOVIRUS TYPE 1.....								1		1
1102 POLIOVIRUS TYPE 2.....										2
1200 MUMPS VIRUS.....			1					1		
1300 HERPES VIRUS GROUP-NOT TYPED..		19	1				1		1	1
1302 EPSTEIN-BARR VIRUS (EB VIRUS).			3		1					
1306 HERPES SIMPLEX TYPE 1.....	1	4	2					1		
1307 HERPES SIMPLEX TYPE 2.....		77								
1401 COXIELLA BURNETI.....			1		2		6	44	1	
1521 MEASLES VIRUS.....					1					
1522 RUBELLA VIRUS.....									1	

See footnotes at end of table.

AUSTRALIA - COMMUNICABLE DISEASES INTELLIGENCE

PERIOD : 26/6/80 to 9/7/80 ... 80/14
Viral Identifications by Clinical Information Table 2.
Code 10 -Eye; 59 -Genital; 39 -Endo/sal gland;
38 -RES; 29 -Muscle/joint; 69 -Congenital; P8 -PUO;
G8 -Fever/malaise; 09 -Other; A1 -SIDS ... -CONTINUED

VIRUS OR VIRAL ANTIGEN	Eye	Genital	Endo/sal gland	RES	Muscle/joint	Congenital	PUO	Fever/malaise	Other	SIDS
1531 HEPATITIS B VIRUS.....									1	
1541 CHLAMYDIA A - TRIC TYPE.....	3	17								
1556 CMV - CYTOMEGALOVIRUS.....		1				1	5	1	3	2
ROSS RIVER VIRUS					21			1		
ARBO. GROUP b.								3		
Total.....	13	118	10		29	2	21	61	10	9